

Dated: February 3, 1998.

William K. Hubbard,

*Associate Commissioner for Policy
Coordination.*

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-R-228]

Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)

AGENCY: Health Care Financing
Administration.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

We are, however, requesting an emergency review of the information collections referenced below. In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, we have submitted to the Office of Management and Budget (OMB) the following requirements for emergency review. We are requesting an emergency review because the collection of this information is needed before the expiration of the normal time limits under OMB's regulations at 5 CFR, Part 1320. This collection is necessary to ensure compliance with section 1854 of the Balanced Budget Act. Under Part C of the Social Security Act, a Medicare+Choice (M+C) organization is required to submit an Adjusted Community Rate (ACR) proposal prior to 05/01/98, which is used by M+C organizations to price its benefit packages. Without emergency approval

entities interested in participating in the M+C program will not be afforded enough time to submit the required application prior to the 05/01/98 deadline. As a result, public harm is likely to result because eligible individuals may not receive the M+C health insurance options stipulated by the BBA.

HCFA is requesting OMB review and approval of this collection by 02/20/98, with a 180-day approval period. Written comments and recommendations will be accepted from the public if received by the individuals designated below by 02/19/98. During this 180-day period, we will publish a separate **Federal Register** notice announcing the initiation of an extensive 60-day agency review and public comment period on these requirements. We will submit the requirements for OMB review and an extension of this emergency approval.

Type of Information Request: New collection.

Title of Information Collection: Managed Care Adjusted Community Rate (ACR) Proposal.

Form Number: HCFA-R-228 (OMB approval #: 0938-NEW).

Use: This collection effort will be used to price the benefit package sold to Medicare beneficiaries who will be enrolled in M+C. Organizations submitting the Managed Care Adjusted Community Rate Proposal form would include all M+C organizations plus any organization intending to contract with HCFA as a M+C organization. This would include any eligible organizations with a managed care risk contract, as defined in 42 CFR § 417.401 of federal regulations, in effect on January 1, 1998 with intentions of offering a M+C plan starting January 1, 1999. These current Medicare managed care risk contractors will be required to submit this form no later than May 1, 1998 for the calendar year 1999.

Frequency: Annually.

Affected Public: Businesses or other for profit, not-for-profit institutions.

Number of Respondents: 350.

Total Annual Responses: 350.

Total Annual Hours Requested: 35,000.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, E-mail your request, including your address, phone number, and HCFA form number(s) referenced above, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326.

Interested persons are invited to send comments regarding the burden or any other aspect of these collections of information requirements. However, as

noted above, comments on these information collection and recordkeeping requirements must be mailed and/or faxed to the designees referenced below, by 02/19/98:

Health Care Financing Administration,
Office of Information Services,
Information Technology Investment
Management Group, Division of
HCFA Enterprise Standards, Room
C2-26-17, 7500 Security Boulevard,
Baltimore, MD 21244-1850, Fax
Number: (410) 786-1415, Attn: John
Rudolph HCFA-R-228

and,

Office of Information and Regulatory
Affairs, Office of Management and
Budget, Room 10235, New Executive
Office Building, Washington, DC
20503, Fax Number: (202) 395-6974
or (202) 395-5167 Attn: Allison
Herron Eydt, HCFA Desk Officer.

Dated: February 5, 1998.

John P. Burke III,

*HCFA Reports Clearance Officer, HCFA,
Office of Information Services, Information
Technology Investment Management Group,
Division of HCFA Enterprise Standards.*

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[Document Identifier: HCFA-R-227]

Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)

AGENCY: Health Care Financing
Administration.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 (PRA), the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to